Question Number	RFP Page Number	RFP Section Reference Number	Questions with State Responses (in bold)
1.	8	1.2	Has OVHA and/or its partner agencies conducted qualitative research (e.g., focus groups) with uninsured individuals to date?
			To date, the OVHA and/or its partner agencies have not conducted qualitative research on uninsured individuals. As indicated in RFP section 1.2, the 2005 Household Insurance Survey (with associated analysis) provides information on the uninsured and can be accessed at:  http://www.bishca.state.vt.us/
			nttp://www.bishca.state.vt.us/
2.	9	1.2.3	What stakeholders are on the Committee?
			The list of Steering Committee stakeholders can be accessed at (document titled "Outreach and Enrollment Steering Committee"):
			http://www.hcr.vermont.gov/task_forces
			Additional people will be added as needed to represent various perspectives (e.g., carriers, providers).
3.	14	2.1	Will the target audience for outreach be both uninsured individuals and employers?
			Yes. As indicated in RFP section 2.1, "using a unified marketing campaign with specialized messages for specific populations and broader audiences." Other examples of target audiences might be health care providers, insurers, etc.
4.	14	2.1	To what extent will current enrollment processes be subject to modification to streamline the process for the uninsured?
			The State is reviewing different options for streamlining enrollment processes and expects to make some short-tem and long-term changes to facilitate enrollment goals.
5.	15	2.1	Define the elements of the 'tool kit' (in the collateral development section) as you understand them.
			A tool kit" refers to materials designed for specific audiences. Bidders are expected to consider the cost effectiveness of a "tool kit," then make recommendations accordingly as part of their proposal as to what elements to include in a "tool kit" and should consider that multiple tool kits may be necessary depending on the target audiences that the bidder defines.
6.	15	2.1	Will a trade show booth need to be designed and constructed as part of the scope?
			Bidders are expected to consider the cost effectiveness of a trade show booth then make recommendations accordingly as part of their proposal as to whether a trade show booth will need to be designed and constructed.



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7.	14-16	2.1	Are there specific elements of a Public Relations campaign that OVHA expects to see in the proposed outreach and enrollment strategy? For example, does OVHA expect a website to be developed or is use of existing websites anticipated? Does OVHA expect a multiple events around the State or a single event to announce the October 1, 2007 start date?
			Bidders are expected to make recommendations regarding the use of current or new web-sites (see Question 8 below) and conducting site events as part of their proposal.
			Listed strategies include communication of a "broad-based, compelling message" and "re-branding of current public health programs and new health programs into one." Yet, another listed strategy specifies "promotion of all available insurance products and subsidies, including private market options." There is a potential contradiction between the former and latter goals, if both are applied to public messaging. This conflict can be resolved if promotion of all available insurance products and subsidies occurs for potential enrollees after they have been identified and recruited through an integrated, public messaging strategy into a unified continuum of state health insurance programs. Is this kind of approach consistent with the thinking of the RFP authors?
			Bidders are expected to make recommendations about the best way to achieve the highest enrollment as part of their proposal.
			Although the RFP lists "media buying and placement" among the services the state wishes to purchase, the RFP does not specifically refer anywhere to production of media such as radio or television. Are TV and radio production contemplated within the scope of work?
			Bidders are expected to make recommendations regarding the cost effectiveness of such media campaigns as part of their proposal.
8.	16	2.1	Is there an existing website for the web/internet marketing?
			There are a number of websites that bidders should consider and make recommendations accordingly. Examples include:
			Office of Vermont Health Access: www.ovha.vermont.gov
			Health Care Reform: www.hcr.vermont.gov
			Agency of Human Services Screen Door : http://screendoor.vermont.gov
			BISHCA Health Care Administration: <a href="http://www.bishca.state.vt.us/HcaDiv/hcadefault.htm">http://www.bishca.state.vt.us/HcaDiv/hcadefault.htm</a>
9.	17	2.1.1	What currently exists regarding "user-friendly web-based screening tools"?
			The only web-based screening tool currently available is the AHS Screen Door (see response to Question 8); however, this is not specific enough for the health care reform goals. The State is



Question Number	RFP Page Number	RFP Section Reference Number	Questions with State Responses (in bold)
			discussing options for "user-friendly web-based screening tools" but is open to recommendations from bidders.
			How does the State system functionality support the tracking of application status and change in eligibility?
			The current eligibility determination system is the ACCESS system. The State is evaluating its options to re-design this system and expects to consider recommendations for implementation in the future.
10.	17	2.1.1	The RFP states: "All of the above must be coupled with the tools needed for effective screening and enrollment, including shifting from the current relatively passive approach (e.g., using brochures, a 1-800 number, a paper applications and office-based staff) to a more pro-active and consumer friendly approach. These activities will be undertaken by the State, but will need to be closely tied to implementation of the OEP." Can you provide the vendors with some indication of the type of activities contemplated by the State and the timeframe for these activities?
			For example, the State is reviewing different options for streamlining enrollment processes and expects to make some short-tem and long-term changes to facilitate enrollment goals.
11.	17	2.1.1	Regarding paragraph two: Please delineate the State's and the Bidder's responsibility for activities mentioned in the second paragraph. Is the Bidder to propose and/or design a new screening and enrollment system or will they make recommendations the State will use to design and develop a new system? Will the Bidder need to re-purpose existing application forms?
			These are the responsibility of the State, not the Bidder, but the State is open to recommendations from Bidders.
12.	18	2.2	Is there a range of available funds and preferred length of contract? Will there be options to renew the contract?
			Does the State have an estimated value/budget for this contract? Is there a budget target established for outreach and enrollment or a target for the cost-per-enrollee? What is the budget for the project? Is there a limit on project funding allocated or available for each year of the project?
			Does OVHA have a specific budget or range that vendors might use as a guide in developing the Scope of Work?
			What is the duration of this contract?
			What is the budget for this contract?  The contract resulting from the RFP is projected to be a multi-year contract. However, the actual contract length will be based on the proposal (with milestones/deliverables and associated timeframes) selected in response to the RFP. The amount of the contract award is also dependent on the cost proposal selected in response to the RFP.



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13.	18	2.2	Please confirm that the contractor is responsible for determining the deliverables/milestones for payments under this contract.
			Bidders are responsible for determining the deliverables/milestones with associated timeframes and the payments associated with the deliverables/milestones as part of their proposal.
14.	18, 31	2.2, 4.9	Are bidders free to propose their own milestones based on their proposed solution, or does the state require the payment milestones to correspond to the table presented on pages 14 through 17?
			The table on RFP pages 14-17 should be used as a guide for the types of services and deliverables/milestones the Bidder is proposing. However, the Bidder is free to add additional services with a rationale for their inclusion, or not propose all items in the Table with a rationale for their exclusion.
15.	19	3.2	Please confirm that all deliverables must be completed between March 19, 2007 and October 1, 2007.
			Bidders are responsible for determining the deliverables/milestones with associated timeframes. It is expected that this will be a multi-year contract with the work extending beyond October 1, 2007.
16.	25	4.7	Is there a particular format or cost form required for submission of cost proposal?
			No, but the cost proposal should clearly tie to the deliverables/milestones and the Narrative Proposal.
17.	25	4.7	The Narrative and the Cost need to be packaged separately, but, can they be sent in the same box?
			Yes.
18.	26	4.8	Will appendices be included in the proposal evaluation?
			As indicated in RFP 5.2, References (which are an appendix) are part of the proposal evaluation.
19.	26	4.8	Do you consider a double-sided page as 1 or 2 pages (i.e., is the requirement for 25 double-sized pages meant to be the equivalent of 50 single-sided pages or 12.5 pages of text on both sides)? Is the maximum length of the narrative proposal excluding attachments 25 pages, or 25 sheets double-sided?
			25 pages, (14 double-sided pages and 1 single sided page) is the maximum.
20.	27	4.8.1	Seeing that the Gantt chart plan will be multiple pages, is it to be included in the 25-page maximum or should it be included as an attachment?
			Include the Gantt chart as an attachment.
			Are appendices and Gantt charts exempt from the 12-point font requirement? Yes.



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21.	27	4.8.1	Is the Table of Contents included in the 25 page maximum? <b>No.</b>
22.	29	4.8.6	Would it be acceptable to move the complete list of "Medicaid/Medicaid-related, Health/Health-related, Insurance/Insurance-related projects from January 2000 through the present date" to the appendices? <b>No.</b>
23.	29	4.8.7	Please define what is meant by "efficiency mechanisms" within the requirements for the Work Plan.  This relates to RFP section 3.5. The State is interested in proposals that provide the "best value" (i.e., optimum combination of economy and quality that is the result of fair, efficient, and practical business processes).
		1001	
24.	30	4.8.9.1	Would it be acceptable to move the list of State of Vermont contracts to the Appendices?
			RFP section 4.8.9.1 is a subsection of 4.8.9 which is an appendix.
25.	31	4.8.10	The OE RFP requires the submission of "audited" financial statements for the past three years for the bidder and any subcontractor. Since the vast majority of privately held Vermont businesses do not incur the cost of having their financial reports audited, is it acceptable to send either a financial review as prepared by a CPA or a CPA-prepared Vermont tax return as filed?  Yes.  If the bidder must indeed be audited, is it acceptable for subcontractors not be audited but that subcontractors have a financial review as prepared by a CPA, or include their tax return as filed?  Yes.  The RFP requires three years of audited tax returns for prime contractor and all subcontractors. Will a bidder be disqualified if they have only been existence for two years (thus two years of returns)?
			No.
26.	42	6.17.3	"Executive Order 924 encourages each State agency to meet a goal of 10% of the dollar value of all procurements be awarded to small and small disadvantaged and minority and woman-owned businesses as subcontractors" how does this apply to this procurement?
27.	50	Appendix 1	As indicated in the citation, it is encouraged but not mandatory.  There is a network error on http://www.ahsinfo.ahs.state.vt.us/ContractAdmin/contract_attachments.htm
21.	50	Appendix I	
			Can the appendices be provided?
			Yes. They are posted at <u>www.ovha.vermont.gov</u>



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28.			For cost estimate purposes, what target quantities should be used for fact sheets, brochures, etc?
			Quantities should be determined by the bidder based on the elements of their proposal. Here are some possible examples (examples only): approximately 620,000 Vermonters; 60,000 uninsured; 10,000 providers.
29.			Will the state be assuming direct pay for all printing?
			No. It will be an expense incurred by the selected bidder that is then reimbursed by the State. These types of expenses should be included as "pass-through" expenses in the bidder's proposal. Pass-through expenses are expenses such as printing, media buys and postage. Bidders cannot incur profit on pass-through expenses.
			Will the state be assuming direct pay to media outlets for all media buys?
			No. It will be an expense incurred by the selected bidder that is then reimbursed by the State. These types of expenses should be included as "pass-through" expenses in the bidder's proposal. Pass-through expenses are expenses such as printing, media buys and postage. Bidders cannot incur profit on pass-through expenses.
30.			If conducting primary research (message testing focus groups), are there any restrictions around cash payments for honorariums for participants?
			A bidder may pay a nominal amount to assist in recruitment/participation for contract activities such as focus groups.
31.			The RFP indicates bidder accountability to several individuals or departments of the State Administration:
			The selected bidder will have "direct contact with the Director of Healthcare Reform Implementation throughout project implementation." (p.8)
			The bidder will meet with the Outreach and Enrollment Steering Committee "as necessary" to inform the development and implementation of the Outreach and Enrollment Plan/ (pp.8,9)
			<ul> <li>"This RFP is being issued administered by OVHA" (p.11) The bidder will work with the OVHA     Outreach and Enrollment Coordinator "to oversee the development and implementation of all     activities in scope of work" (p.12)</li> </ul>
			The Economic Services Division of the Department for Children and Families "has significant responsibility for the design and execution of outreach strategies that are aimed at enrollment." (p.13)
			Questions: To which officer of the state government is the bidder directly or primarily accountable? Which officer has lead responsibility as the state's liaison with the bidder in the various aspects of project implementation? If these several government officers all have some degree of oversight authority, then what is the decision-making process, and with whom does final decision-making authority reside? In the



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			event of conflicting task directives, how will inconsistencies be resolved?
			The selected Bidder will be reporting to the Office of Vermont Health Access or its authorized agent (i.e., the Outreach and Enrollment Coordinator as described in RFP section 1.3.1.1). The selected Bidder will have direct contact with other entities such as those listed in the question. The contract will be between the Office of Vermont Health Access and the selected Bidder.
			The RFP indicates that payment will be based on completion of deliverables and "accomplishment of milestones." Who, specifically, determines whether the milestones have been accomplished?  The Office of Vermont Health Access or its authorized agent.
			The office of Verifion Health Access of its authorized agent.
			VT will retain 15% of fees until it is determined that the project goals have been met. Who will make this determination? What standards will be applied?
			Milestones and deliverables will be signed off on by the Office of Vermont Health Access or its authorized agent. Upon completion with corresponding sign-off of all milestones/deliverables (i.e., contract conclusion), the selected bidder will receive the 15% retainage.